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# *Evaluation Report*

of

## Teacher Training

in

## HIV/AIDS Education



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**1997-98 TEACHER TRAINING EVALUATION REPORT**

**HIV/STD EDUCATION PROGRAM**

**MONTANA OFFICE OF PUBLIC INSTRUCTION**

**September 1998**

**Submitted to:**

**Montana Office of Public Instruction  
HIV/STD Education Program  
P. O. Box 202501  
Helena, Montana 59620-2501**

**Submitted by:**

**Dodge Data Systems, Inc.  
1400 Eleventh Avenue  
Helena, Montana 59601**

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## **I. INTRODUCTION**

The Montana HIV/STD Education Program of the Office of Public Instruction (OPI), through a cooperative agreement with the Division of Adolescent and School Health of the U.S. Centers for Disease Control and Prevention (CDC), provides assistance to schools in Montana in organizing and delivering HIV/STD education programs. The major emphasis of the program is district-level training to develop knowledge, confidence, competency, and skills among teachers so that they can provide effective HIV/STD prevention education at the classroom level. Training activities focus on continuing education for regional trainers who, in turn, offer training to local teachers on HIV prevention education.

During the 1997-98 school year, the regional trainers conducted five training seminars for teachers where 55 teachers were trained in effective HIV/STD prevention education. Training sessions were conducted throughout the school year, including sessions held in conjunction with other teacher training activities.

It should be noted that the Montana HIV/STD Education Program and its regional trainers conducted other workshops and educational activities besides the five regional teacher training workshops. These other activities include three teacher training activities that were less than five hours in duration (thus, not qualifying for teacher certification renewal units and not evaluated in the same manner as a regional training), six workshops for ancillary school staff, one community presentation on awareness of AIDS issues and the role of school-based HIV prevention education, six preservice education workshops for prospective teachers, six peer education projects, and 18 presentations for students on reducing risks that cause HIV infection.

In July 1997, the OPI contracted with Dodge Data Systems, Inc., of Helena

to provide survey and evaluation services. A major emphasis of the contract was to evaluate the teacher training program within the HIV/STD Education Program. This report details the methods used to evaluate the training, the results of the evaluation process, and recommendations for changes within the training program. Appendix A contains the results of the post-test surveys related to knowledge inventory, ability inventory, and prevention education barrier inventory; Appendix B includes the results of the follow-up survey conducted in May of 1998; Appendix C contains the evaluation survey instruments used in this evaluation; and Appendix D contains the follow-up survey instrument.



## **II. EVALUATION**

### **A. Overview and Objectives**

Key training components for the 1997-1998 teacher training program were the planning and information update workshop for regional trainers, training for teachers by the trainers in the curriculum "Get Real about AIDS," and the five regional workshops provided by the trainers for teachers. Each regional workshop provided five to six hours of training in skills-based activities.

It was the continuing expectation of the HIV/STD Education Program that the planning and information update workshop would maintain the regional trainers' ability to:

- 1) understand the role of a regional trainer and the role of the HIV/STD Education Program in developing competent, confident and knowledgeable teachers in local schools regarding HIV/STD prevention education;
- 2) refine the design for HIV/STD teacher training regional workshops and incorporate more skills development activities from curricula with credible evidence of effectiveness;
- 3) lead HIV, AIDS, and STD training activities;
- 4) conduct regional HIV/STD teacher training sessions for local area teachers;
- 5) employ a step-by-step process for setting up, conducting, and evaluating each regional training;
- 6) conduct HIV/STD awareness, education and worksite safety workshops for ancillary staff persons from local area schools;



- 7) conduct community workshops to promote an understanding of effective school-based HIV/STD prevention education;
- 8) provide one-to-one teacher mentoring; and
- 9) develop a peer education component to complement the teacher training workshops.

It should be noted that regional trainers must demonstrate exceptional knowledge of basic HIV information, policy issues, school methodology, curriculum development and design, and strategies to integrate HIV education into a comprehensive health curriculum.

The objectives of the state-level and regional workshops were nearly identical, with some adjustment depending on participants. Principal objectives for comprehensive workshops were to:

- 1) increase knowledge and skills to teach effectively about HIV and STD;
- 2) increase comfort level and competency in teaching about HIV and STD prevention;
- 3) use a step-by-step approach to practice developing, conducting, and evaluating teacher training on HIV;
- 4) understand basic components of effective training design, including needs assessment, objectives, design, training management checklists and adult learning theory;
- 5) learn skills for effective group management and leadership;
- 6) clarify roles as trainers for HIV education;
- 7) be able to identify their own values and attitudes related to HIV and to promote respect for religious, cultural, and attitudinal diversity;

- 8) be able to experience a wide range of learning techniques;
- 9) acquire skills in handling controversial aspects of HIV; and
- 10) observe and critique a sample HIV teacher training session.

## **B. Evaluation Process**

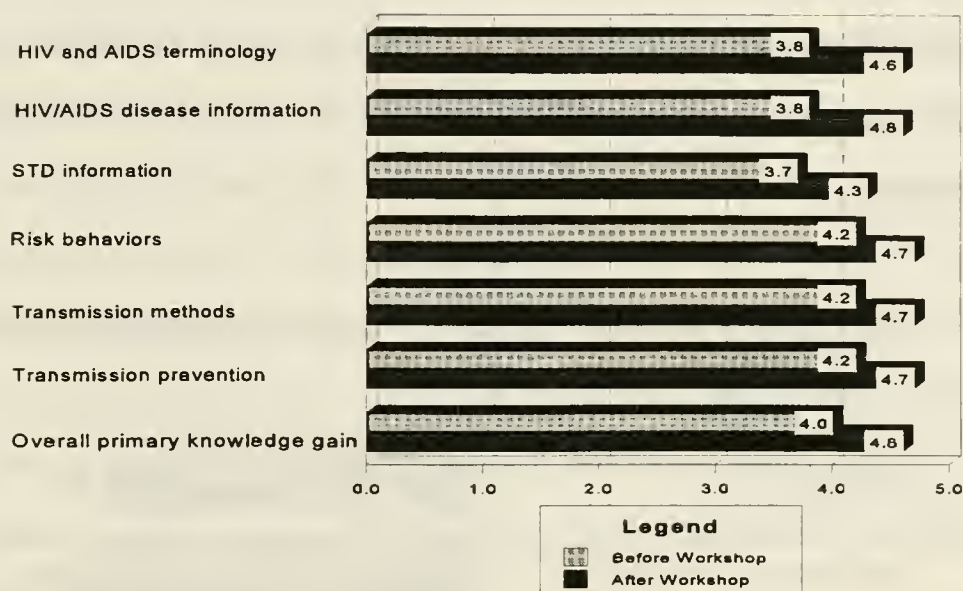
A formative evaluation process was developed and the following sources of information were used to evaluate each of the regional workshops: 1) direct observation; 2) post-training surveys related to knowledge of HIV issues and to confidence in ability to carry out key component activities of a successful HIV education project; 3) a perceived barrier inventory administered after the training sessions; and 4) a rating and open-ended evaluation by each of the workshop participants. The results of the evaluation process are presented in the following sections of the report.

## **C. HIV Prevention Education Knowledge Inventory**

Workshop participants were asked about the level of their knowledge **before** and **after** the workshops regarding HIV/AIDS information, resource availability and access levels, teaching skills development and policy issues. Knowledge levels were rated from 5 (high degree of knowledge) to 1 (low degree of knowledge) for all questions in the knowledge inventory. Primary HIV/AIDS knowledge topics included HIV/AIDS terminology, HIV/AIDS disease information, STD information, risk behavior, transmission methods, and transmission prevention. Participants rated their overall knowledge of these primary topics at 4.0 before the workshop and 4.6 after the workshop (Figure 1 and Appendix A, pages A1 and A2), which indicates that participants felt there was significant overall knowledge gained in primary HIV/AIDS information from the workshop (a 15 percent gain).

**FIGURE 1**

**PRIMARY HIV/AIDS EDUCATION KNOWLEDGE COMPONENTS**



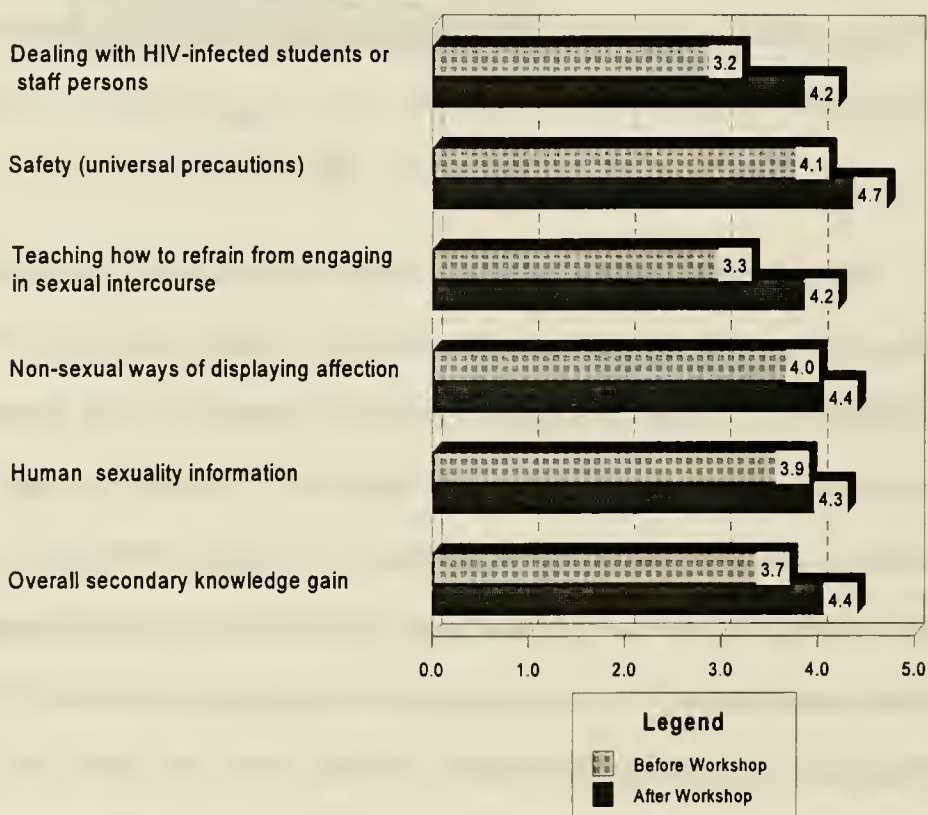
High knowledge gains in individual primary topics were reported with HIV/AIDS terminology (21 percent knowledge gain); HIV/AIDS disease information (21 percent knowledge gain); and with STD information (16 percent knowledge gain). Lesser primary knowledge gains were reported with risk behaviors, transmission methods and transmission prevention (12 percent knowledge gain for each component). However, participants felt that their levels of knowledge of risk behaviors, transmission methods and transmission prevention were substantial before the workshop, since these three primary components were the highest knowledge levels reported both before and after the workshop.

Secondary HIV/AIDS knowledge topics included dealing with HIV-infected students or staff persons, safety (universal precautions), teaching how to refrain from

engaging in sexual intercourse (abstinence), non-sexual ways of displaying affection, and human sexuality information. Participants rated their overall knowledge of these secondary topics at 3.7 before the workshop and 4.4 following the workshop (Figure 2 and Appendix A, pages A2 and A3), which indicates that participants felt there was significant overall knowledge gained in secondary HIV/AIDS information from the workshop (a 19 percent gain).

**FIGURE 2**

**SECONDARY HIV/AIDS EDUCATION KNOWLEDGE COMPONENTS**



High knowledge gains in individual secondary topics were reported in dealing with HIV-infected students or staff persons (31 percent knowledge gain), teaching how to refrain from engaging in sexual intercourse (27 percent knowledge gain), and safety or



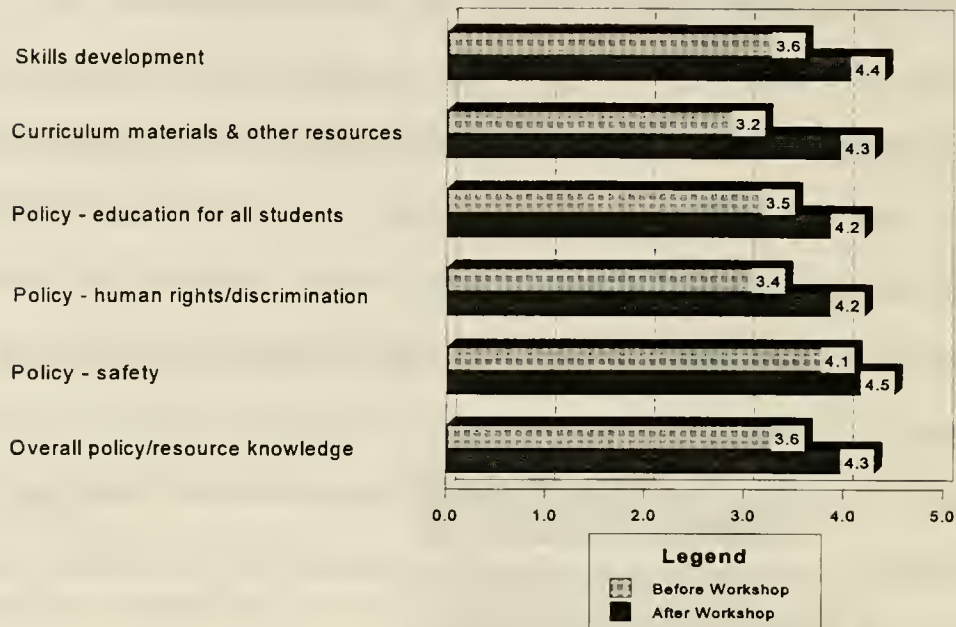
universal precautions (15 percent knowledge gain). The smallest gains in secondary knowledge components were reported in non-sexual ways of displaying affection and human sexuality information (10 percent gain for each component).

Resource and policy knowledge topics included skills development (decision-making skills, refusal skills, problem solving, and critical thinking), curriculum materials and other resources, policy issues related to education for all students, policy issues related to human rights and discrimination, and policy issues related to safety (blood/body fluid cleanup, etc.). Participants rated their overall knowledge of these resource and policy topics at 3.6 before the workshop and 4.3 after the workshop (Figure 3 and Appendix A, pages A3 and A4), which indicates that participants felt there was significant overall knowledge gained in secondary HIV/AIDS information from the workshop (a 19 percent knowledge gain).

High knowledge gains were reported with curriculum materials and other resources (34 percent knowledge gain), policy issues related to human rights and discrimination (24 percent knowledge gain), skills development (22 percent knowledge gain), and policy issues related to education for all students (20 percent knowledge gain). Lesser knowledge gains were reported in policy issues related to safety (10 percent knowledge gain). Participants felt they became most knowledgeable about curriculum materials and other resources, which they reported at a level of 4.3 following the workshops. Policy issues related to education for all students and human rights/discrimination were rated the lowest in knowledge with each rated at a level of 4.2 following the training sessions.

**FIGURE 3**

**HIV/AIDS RESOURCES/POLICIES KNOWLEDGE COMPONENTS**



**D. HIV Prevention Educator Ability Inventory**

Success in providing effective HIV education requires more than knowledge about HIV. It also requires educators to be confident in their ability to provide students with an effective instructional program.

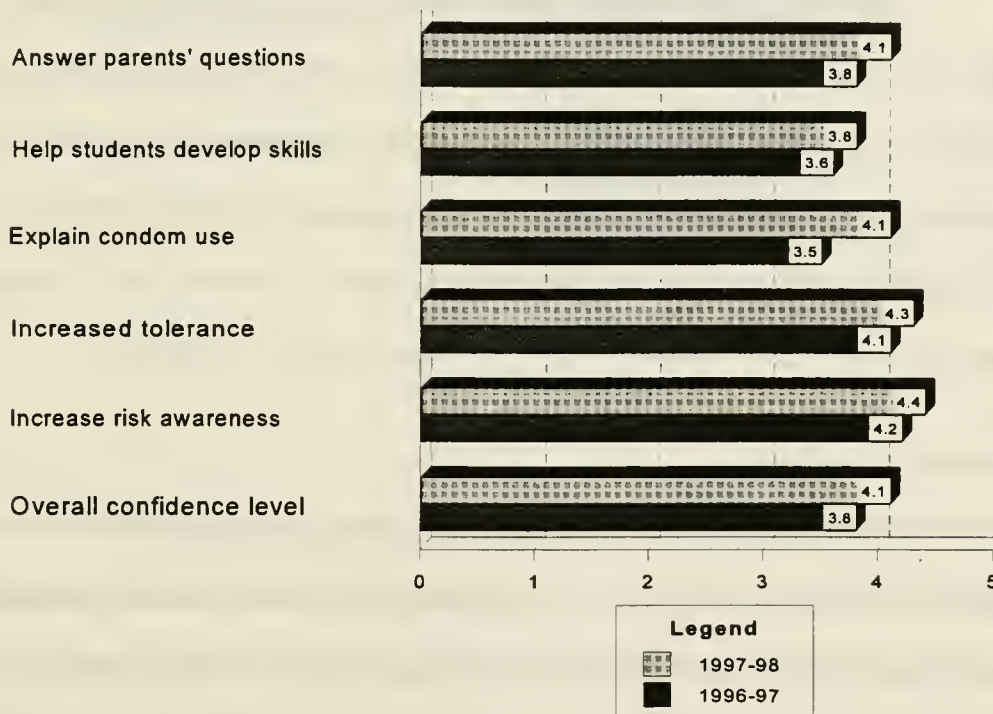
The confidence inventory consisted of a six-question survey that was administered to workshop participants after the training session. Respondents were asked to assess self-confidence in their ability to carry out activities that are key components of all successful HIV education programs. Participants were queried to rank their perceived confidence on a scale from 1 to 5, with 5 being completely confident and 1 being not at all confident.

Comparison of the pre-test and post-test results indicated that, following the training sessions, most workshop participants had strong confidence in their ability to carry

out the listed activities (Figure 4 and Appendix A, pages A5 and A6). The overall confidence level listed for all categories was 4.1 (on the 5 scale), which indicates a strong confidence in the workshop participants' abilities to deliver quality HIV-related education. The highest degree of confidence was exhibited in the workshop participants' ability to help students reach a more accurate perception of their risk to infection with HIV (4.4 rating) and to increase student tolerance toward people with HIV or AIDS (4.3 rating).

**FIGURE 4**

**HIV PREVENTION EDUCATION ABILITY INVENTORY**



**E. HIV Prevention Education Barrier Inventory**

Workshop participants were asked to rate the degree to which various potential barriers were present and preventing implementation of effective HIV prevention education in their individual school districts. Nine potential barriers were listed and respondents were



asked to rank the potential barriers from 5 (major barrier) to 1 (not a barrier). Figure 5 lists the results of the survey as reported by workshop participants.

The most significant barriers as seen by the workshop participants were parental resistance to HIV education in school settings and perceptions that youth in their particular communities are not at risk for HIV infection (Figure 5 and Appendix A, pages A7 and A8). Other important barriers noted were concerns that sexually explicit information will encourage promiscuous sexual behavior and the difficulty in integrating HIV/AIDS materials into an already saturated curriculum.

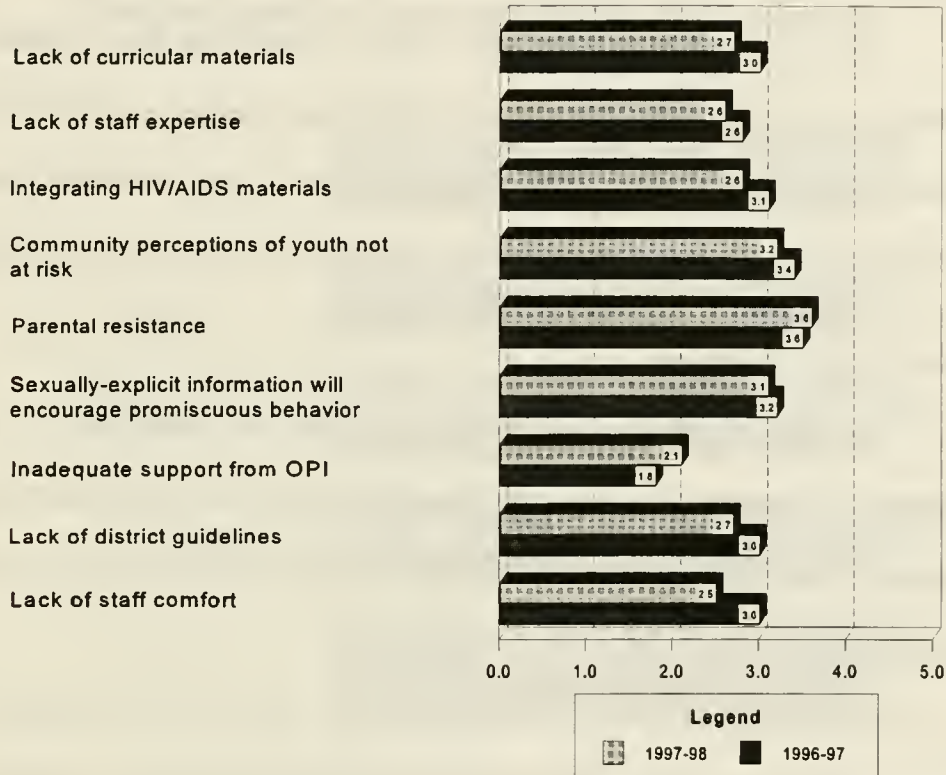
None of the potential barriers listed were rated as being major barriers, as the overall rating was 2.8 (midway between 5 as a major barrier and 1 as not being a barrier). The potential barrier rated the lowest was inadequate support from the Montana Office of Public Instruction -- apparently, most workshop participants felt that the OPI was doing its part in implementing effective HIV prevention education in schools (Note: This potential barrier has been rated the lowest in each of the last six years' evaluations).

#### **F. General Questions**

At the conclusion of each workshop, several general questions related to HIV education and training were asked of all workshop participants. Nearly 51 percent of the workshop participants had attended other OPI-sponsored prevention workshops in the past three years. Fifty-one percent of the participants indicated that they were taking the training sessions for teacher certification renewal credits.

FIGURE 5

# HIV PREVENTION EDUCATION BARRIERS



When asked to rate their post-workshop overall knowledge and confidence levels (on a scale from a high of 5 to a low of 1), participants felt that they were highly knowledgeable (average ranking was 4.4) and quite confident (4.2 average ranking). These levels are substantiated by the rankings in the individual areas presented earlier in this report.

Open-ended questions were asked regarding how the OPI could assist in removing barriers to presenting effective HIV prevention education, and what other topic areas could have been covered in the workshops. Most of the comments regarding additional OPI assistance in removing potential barriers were related to expanding the

workshops and expanding information delivered by the OPI to include communities, school boards, and students (Appendix A, pages A10 and A11). Other comments included making more information available, and continuing the current workshops.

When queried as to what other topics should have been covered in the workshops, respondents most often mentioned additional materials and making more time available to conduct the workshops (Appendix A, pages A12 and A13). Many comments were complimentary in nature, and encouraged continued offering of the workshops.

### **G. Workshop Evaluations**

Each training session was evaluated by the participants using a summary evaluation form (Appendix C, page C6). Workshop participants were asked to rate the workshop with respect to: 1) an overall evaluation; 2) information; 3) materials; 4) teaching strategies; and 5) skills practice.

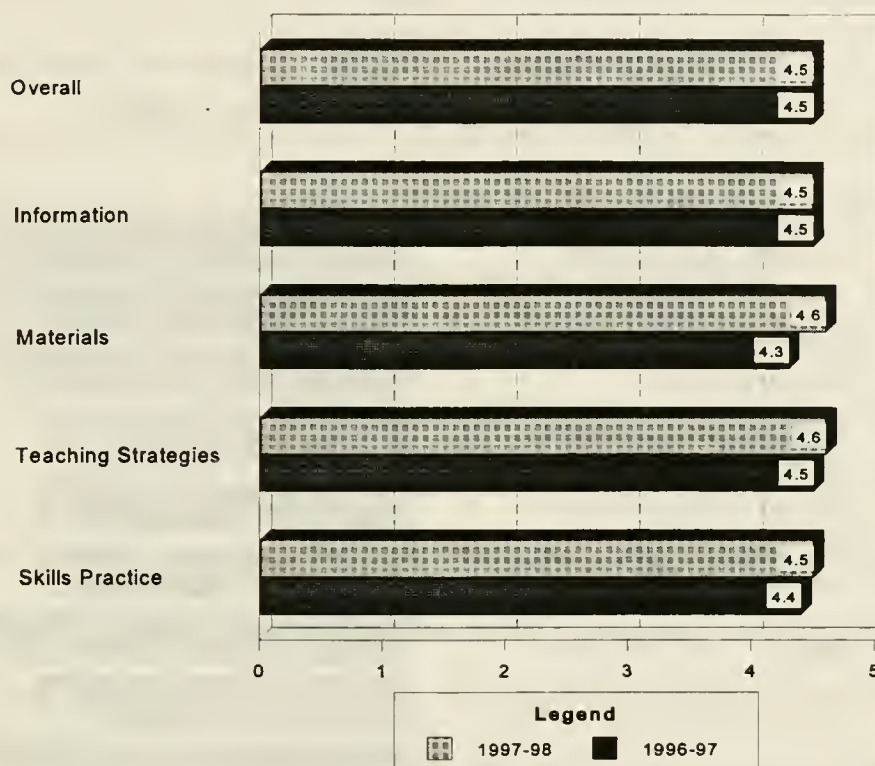
All components of the workshops were rated above average to superior (Figure 6 and Appendix A, page A15). Overall, the training sessions received a 4.5 rating on a 5-point scale (5 was superior). Teaching strategies and materials received the highest rating of 4.6, while information delivery and skills practice were next with a 4.5 rating. None of the workshop participants thought any of the workshops were average or below average.

### **H. Follow-up Survey**

All workshop participants (55) were mailed a follow-up survey in May 1998. The response rate was 51 percent (28 responses). Of the 28 responses, 19 (68 percent) indicated that they had provided HIV instruction to students since completion of the workshops. The average number of classroom periods of HIV instruction provided by the

37 teachers was 6.13. The number of hours of instruction ranged from one hour to 20 hours.

**FIGURE 6**  
**HIV PREVENTION EDUCATION SUMMARY EVALUATION**



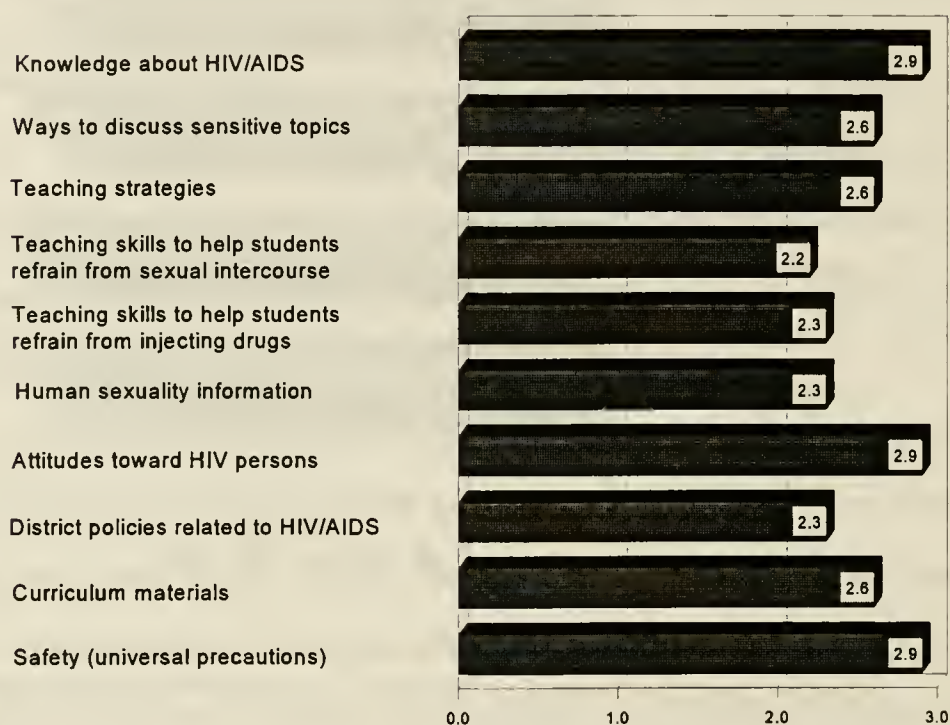
Workshop participants were also asked to rank ten HIV workshop topics as to their importance in providing quality HIV education (3 = very important, 2 = somewhat important, 1 = not at all important). Figure 7 (and Appendix B, page B1) lists the results of the ranking from the 19 respondents who reported providing HIV instruction to students.

As illustrated, workshop participants indicated that knowledge about HIV/AIDS, attitudes toward HIV-infected persons, safety (universal precautions), ways to discuss sensitive topics, teaching strategies and curriculum materials are the most important



workshop topics in their efforts to provide quality HIV education to students. Of significance to the knowledge gained by the participants, but of lesser importance to the participants, were skills to help students refrain from injecting drugs, human sexuality information, district policies related to HIV/AIDS and skills to help students refrain from engaging in sexual intercourse.

**FIGURE 7**  
**IMPORTANCE OF WORKSHOP TOPICS**



### III. CONCLUSIONS AND RECOMMENDATIONS

From 1990 through the 1997-98 school year, the Office of Public Instruction's HIV/STD Education Program has provided formal, multiple-hour, skills-based training and education to over 3,400 teachers, administrators, and ancillary school staff. Based on this year's findings, about one-half (49 percent) of teachers had not attended an OPI training on HIV/AIDS in the last three years. Equally important, a significant number of teachers (about one-half of this year's workshop participants) attended the OPI workshops to update, enhance, or refresh their teaching skills regarding HIV and AIDS.

Data gathered from the knowledge inventory, educator ability inventory, barrier inventory, and summary evaluation during the 1997-98 school year suggest that the HIV/STD Education Program has been successful in achieving its goals related to teacher training activities. The before and after self-reported gains in knowledge were significant and indicate that workshop participants are obtaining the knowledge they need to conduct HIV/STD prevention education. In addition, most of the participants in the 1997-98 training sessions rated the overall education from the sessions as superior. Participants' written comments obtained during the trainer evaluation reflected high satisfaction with the training workshops:

"The workshop was fantastic."

"The guest speakers were amazing! "

"I thought the people directly affected with or by HIV were wonderful! I also gained some great teaching strategies that I incorporated right away."

The continuing success of the teacher training program is entirely attributable to the professional and enthusiastic OPI staff and the willingness of the dedicated regional

trainers to continue to offer their time and abilities in teaching HIV prevention education. Many of the trainers have been with the program since its inception and continue to set standards and practice work ethics that make the training program a success.

Recommendations that program staff should consider for maintaining the effective elements in the teacher training program and for improving other program elements include the following:

- 1) Continue the evaluation of individual regional teacher training workshops using the assessment instrument which measures knowledge and issues.
- 2) Continue to evaluate the regional trainers through on-site observation by the OPI staff using an evaluation tool specifically designed for this purpose.
- 3) Continue to provide effective HIV prevention education and skills-based training that emphasizes behavioral decisions and provides participants with adequate opportunities to practice educational strategies that will result in students who are better able to avoid HIV infection.
- 4) Continue OPI and local district administrative support to the regional HIV educator trainers throughout the school year.
- 5) Continue efforts to increase school administrator support for effective HIV prevention education that is incorporated into a comprehensive plan of school health education.
- 6) Continue to assess and address perceived barriers to HIV prevention education in Montana schools and youth organizations.



- 7) Continue active support to administrators and teachers in developing the ability to remove barriers to effective HIV prevention education.
- 8) Continue to monitor and facilitate the development, revision and implementation of appropriate HIV/AIDS policies at the school district level.
- 9) Continue to nurture collaborative HIV/STD prevention education efforts with other state and community agencies and organizations.
- 10) Continue the multi-day, intensive HIV and STD prevention education workshop focusing on skills development and practice with HIV and STD prevention curricula with credible evidence of effectiveness. This workshop should be held in the summer to eliminate the disruption of the regular school year.
- 11) Continue the graduate-level training and education opportunities for teachers, and design an evaluation mechanism for this component of teacher training.
- 12) Continue the preservice education opportunities for prospective teachers attending teacher preparation programs at public and private units of higher education.
- 13) Investigate the possibility of a local district-based requirement for ongoing staff development for all teachers that would be based on attending an OPI-sponsored or endorsed HIV/STD prevention education workshop once every five years.
- 14) Continue efforts to establish a Board of Public Education-authorized position statement encouraging all local school boards to adopt policies

or position statements ensuring: (a) the provision in their schools of effective, age-appropriate and scientifically accurate HIV/AIDS education, (b) that teachers who provide the education are given training in skills-based, age-appropriate HIV/STD prevention strategies, and (c) that all school staff are provided current scientific information on worksite safety regarding HIV prevention (i.e., universal precautions).

## INFORMATION SOURCES



## INFORMATION SOURCES

ETR Associates, Santa Cruz, California. 1991-92. Teaching HIV/AIDS: Teacher Training Manual.

Montana Office of Public Instruction, HIV/STD Education Program, Helena, Montana. July 1997. 1996-97 Montana Teacher Training Evaluation Report.

Montana Office of Public Instruction, HIV/STD Education Program, Helena, Montana. December 1996. 1995-96 Teacher Training Evaluation Report.

Montana Office of Public Instruction, HIV/STD Education Program, Helena, Montana. December 1995. 1994-95 Teacher Training Evaluation Report.

U.S. Centers for Disease Control, Atlanta, Georgia. May 1992. Handbook for Evaluating HIV Education.

U.S. Centers for Disease Control, Atlanta, Georgia. May 1992. Evaluating HIV Staff Development Programs.



## **APPENDIX A**

### **HIV PREVENTION EDUCATION SURVEY FREQUENCY DISTRIBUTIONS**





# **1997-98 HIV PREVENTION EDUCATION EVALUATION KNOWLEDGE INVENTORY FREQUENCY DISTRIBUTIONS**

**NOTE:** The following frequency distributions are based upon surveys completed by 55 teachers trained by the HIV/AIDS Prevention Education Program. Percentages may not total 100 percent due to rounding.

**Q-1** Please circle the appropriate number to indicate your knowledge level in the listed areas before and after this workshop. (1 is a low knowledge level; 5 is a high knowledge level)

## **A) HIV and AIDS terminology**

	High Knowledge 5	<----- 4	3	-----> 2	Low Knowledge 1
Before Workshop	14.8%	51.9%	29.6%	3.7%	0.0%
After Workshop	64.2%	32.1%	3.8%	0.0%	0.0%

## **B) HIV/AIDS disease information**

	High Knowledge 5	<----- 4	3	-----> 2	Low Knowledge 1
Before Workshop	16.7%	55.6%	22.2%	5.6%	0.0%
After Workshop	67.9%	28.3%	3.8%	0.0%	0.0%

## **C) STD information**

	High Knowledge 5	<----- 4	3	-----> 2	Low Knowledge 1
Before Workshop	11.1%	55.6%	27.8%	1.9%	3.7%
After Workshop	37.7%	52.8%	9.4%	0.0%	0.0%

## **D) Risk behaviors**

	High Knowledge 5	<----- 4	3	-----> 2	Low Knowledge 1
Before Workshop	35.2%	50.0%	13.0%	1.9%	0.0%
After Workshop	79.2%	15.1%	5.7%	0.0%	0.0%

**Q-1 (Cont'd)**

**E) Transmission methods**

	High Knowledge 5	<----- 4	3	-----> 2	Low Knowledge 1
Before Workshop	35.2%	53.7%	11.1%	0.0%	0.0%
After Workshop	73.6%	22.6%	3.8%	0.0%	0.0%

**F) Transmission prevention**

	High Knowledge 5	<----- 4	3	-----> 2	Low Knowledge 1
Before Workshop	33.3%	53.7%	13.0%	0.0%	0.0%
After Workshop	75.5%	22.6%	1.9%	0.0%	0.0%

**G) Dealing with HIV-infected students or staff persons**

	High Knowledge 5	<----- 4	3	-----> 2	Low Knowledge 1
Before Workshop	5.6%	29.6%	44.4%	18.5%	1.9%
After Workshop	45.3%	35.8%	17.0%	1.9%	0.0%

**H) Safety (universal precautions)**

	High Knowledge 5	<----- 4	3	-----> 2	Low Knowledge 1
Before Workshop	31.5%	50.0%	18.5%	0.0%	0.0%
After Workshop	71.2%	26.9%	1.9%	0.0%	0.0%

**I) Teaching how to refrain from engaging in sexual intercourse**

	High Knowledge 5	<----- 4	3	-----> 2	Low Knowledge 1
Before Workshop	9.3%	35.2%	33.3%	20.4%	1.9%
After Workshop	43.4%	35.8%	18.9%	1.9%	0.0%

**Q-1 (Cont'd)**

**J) Non-sexual ways of displaying affection**

	High Knowledge 5	<----- 4	3	-----> 2	Low Knowledge 1
Before Workshop	27.8%	42.6%	29.6%	0.0%	0.0%
After Workshop	54.7%	34.0%	11.3%	0.0%	0.0%

**K) Human sexuality information**

	High Knowledge 5	<----- 4	3	-----> 2	Low Knowledge 1
Before Workshop	24.1%	44.4%	27.8%	3.7%	0.0%
After Workshop	45.3%	39.6%	13.2%	1.9%	0.0%

**L) Skills development (decision-making skills, refusal skills, problem solving and critical thinking)**

	High Knowledge 5	<----- 4	3	-----> 2	Low Knowledge 1
Before Workshop	12.7%	36.4%	49.1%	1.8%	0.0%
After Workshop	43.4%	49.1%	7.5%	0.0%	0.0%

**M) Curriculum materials and other resources**

	High Knowledge 5	<----- 4	3	-----> 2	Low Knowledge 1
Before Workshop	7.4%	27.8%	46.3%	11.1%	7.4%
After Workshop	41.5%	47.2%	11.3%	0.0%	0.0%

**N) Policy issues: education for all students**

	High Knowledge 5	<----- 4	3	-----> 2	Low Knowledge 1
Before Workshop	13.0%	35.2%	38.9%	11.1%	1.9%
After Workshop	31.5%	55.6%	11.1%	1.9%	0.0%

**Q-1 (Cont'd)**

**O) Policy issues: human rights/discrimination**

	High Knowledge 5	<----- 4	3	-----> 2	Low Knowledge 1
Before Workshop	13.0%	31.5%	46.3%	5.6%	3.7%
After Workshop	35.8%	49.1%	15.1%	0.0%	0.0%

**P) Policy issues: safety (blood/body fluid cleanup, etc.)**

	High Knowledge 5	<----- 4	3	-----> 2	Low Knowledge 1
Before Workshop	33.3%	40.7%	25.9%	0.0%	0.0%
After Workshop	58.5%	37.7%	3.8%	0.0%	0.0%

**1996-97 PREVENTION EDUCATION EVALUATION  
ABILITY INVENTORY FREQUENCY DISTRIBUTIONS**

**Q-2** Now that you have participated in a comprehensive staff development workshop for HIV educators, how confident are you that you can:

**A) Present accurate information to students**

	Completely Confident 5	<----- 4	3	-----> 2	Not At All Confident 1
Response	25.5%	61.8%	12.7%	0.0%	0.0%

**B) Answer parent's questions about HIV information**

	Completely Confident 5	<----- 4	3	-----> 2	Not At All Confident 1
Response	25.5%	60.0%	12.7%	1.8%	0.0%

**C) Help students to develop skills to refrain from sex**

	Completely Confident 5	<----- 4	3	-----> 2	Not At All Confident 1
Response	16.4%	52.7%	29.1%	0.0%	1.8%

**D) Explain to students at appropriate ages how a condom should be used**

	Completely Confident 5	<----- 4	3	-----> 2	Not At All Confident 1
Response	33.3%	46.3%	18.5%	1.9%	0.0%

**E) Increase students' tolerance toward people with HIV or AIDS**

	Completely Confident 5	<----- 4	3	-----> 2	Not At All Confident 1
Response	38.2%	49.1%	12.7%	0.0%	0.0%

**Q-2 (Cont'd)**

**F) Help students reach a more accurate perception of their risk to infection with HIV**

	Completely Confident 5	<----- 4	3	-----> 2	Not At All Confident 1
Response	49.1%	38.2%	12.7%	0.0%	0.0%



**1996-97 HIV PREVENTION EDUCATION EVALUATION  
EDUCATION BARRIER INVENTORY FREQUENCY DISTRIBUTIONS**

**Q-3** Listed below are potential barriers to implementing effective HIV prevention education in schools. Please rate the extent to which each potential barrier affects HIV prevention education in your school.

**A) Lack of curricular materials appropriate for use in our school.**

	Major Barrier 5	<----- 4	3	-----> 2	Not A Barrier 1
Response	7.3%	21.8%	20.0%	30.9%	20.0%

**B) Lack of staff expertise in teaching HIV prevention to our students.**

	Major Barrier 5	<----- 4	3	-----> 2	Not A Barrier 1
Response	7.3%	16.4%	27.3%	27.3%	21.8%

**C) Difficulty integrating AIDS materials into an already saturated curriculum.**

	Major Barrier 5	<----- 4	3	-----> 2	Not A Barrier 1
Response	5.5%	27.3%	30.9%	16.4%	20.0%

**D) Perceptions that youth in our community are not at risk of HIV infection.**

	Major Barrier 5	<----- 4	3	-----> 2	Not A Barrier 1
Response	16.4%	30.9%	27.3%	10.9%	14.5%

**E) Parental resistance to HIV education school settings.**

	Major Barrier 5	<----- 4	3	-----> 2	Not A Barrier 1
Response	18.2%	45.5%	18.2%	14.5%	3.6%

**Q-3 (Cont'd)**

**F) Concern that sexually-explicit information will encourage promiscuous sexual behavior.**

	Major Barrier 5	<----- 4	3	-----> 2	Not A Barrier 1
Response	12.7%	30.9%	25.5%	18.2%	12.7%

**G) Inadequate support from the Office of Public Instruction.**

	Major Barrier 5	<----- 4	3	-----> 2	Not A Barrier 1
Response	5.5%	9.1%	14.5%	30.9%	40.0%

**H) Lack of district or school guidelines.**

	Major Barrier 5	<----- 4	3	-----> 2	Not A Barrier 1
Response	10.9%	12.7%	27.3%	29.1%	20.0%

**I) Lack of staff comfort in teaching HIV.**

	Major Barrier 5	<----- 4	3	-----> 2	Not A Barrier 1
Response	5.5%	14.5%	30.9%	23.6%	25.5%

**1996-97 HIV PREVENTION EDUCATION EVALUATION  
HIV PREVENTION EDUCATION GENERAL QUESTIONS  
FREQUENCY DISTRIBUTIONS**

**Q-4 Have you attended any other OPI-sponsored HIV/STD prevention workshop in the past three years?**

	<u>Percent Responding</u>
A) Yes	50.9%
B) No	49.1%

**Q-5 Are you taking this workshop for teacher certification renewal units?**

	<u>Percent Responding</u>
A) Yes	50.9%
B) No	49.1%

**Q-6 Please rate your overall knowledge of HIV/AIDS information (Circle one choice):**

	Good 5	<----- 4	3	-----> 2	Poor 1
Response	37.0%	61.1%	1.9%	0.0%	0.0%

**Q-7 Please rate your overall confidence and comfort level for providing HIV/AIDS information (Circle one choice):**

	Good 5	<----- 4	3	-----> 2	Poor 1
Response	32.7%	58.2%	9.1%	0.0%	0.0%

**Q-8 In what ways would you suggest the Office of Public Instruction assist you in removing barriers to presenting effective HIV prevention education?**

**RESPONSES:**

GUIDELINES REGARDING LAW AND CURRICULUM
EDUCATION OF THE PUBLIC
OFFER MORE MATERIALS/PERSONNEL TO THE SCHOOL DISTRICT
OPI NEEDS TO PROVIDE SCHOOL BOARDS WITH A CURRICULUM
DEVELOP AND DISTRIBUTE COMPREHENSIVE FULL ELEMENTARY CURRICULUM
MORE EDUCATION
THIS IS MY FIRST YEAR, I NEED TO EXPERIENCE THE SECTION
MORE INFORMATION/EDUCATION MATERIALS NEEDED FOR ELEMENTARY SCHOOLS GEARED MOSTLY TOWARD TEENAGERS AND SEXUALLY ACTIVE STUDENTS
SPEAK TO THE SCHOOL DISTRICT AND STRESS THE IMPORTANCE
I AM NOT SURE- I NEVER TAUGHT AN AIDS UNIT
WORK WITH LEGISLATION TO MANDATE THE CURRICULUM IN OUR SCHOOLS
CONTINUE TO SUPPORT WORKSHOPS LIKE THE ONE TODAY
WORK WITH SCHOOL BOARDS AND ADMINISTRATORS TO SUPPORT OUR COVERING THIS TOPIC
EDUCATION OF PARENTS AND COMMUNITY
PUBLIC SUPPORT IN TEACHING CORRECT CONDOM USAGE
IT'S A SOCIETAL ISSUE- ALL ASPECTS OF OUR SOCIETY NEED MORE EDUCATION AND ENCOURAGEMENT TO BE MORE OPEN MINDED AND ACCEPTING. KEEP UP YOUR SUPPORT AND WORKSHOPS.
ALLOWING MORE FREEDOM IN CHOICE OF MATERIALS TO BE USED
EACH SCHOOL IS SO DIFFERENT SO IT IS DIFFICULT TO SAY
MAKE TIME IN SCHOOLS

MANDATE IT
PUBLIC EDUCATION
KEEP US INFORMED THROUGH MATERIALS
SCHOOL BOARD ATTENDS!
EDUCATE PARENTS
POSTERS, FLYERS, NEW INFORMATION ON A REGULAR BASIS
EDUCATING PARENTS

**Q-9      What improvements or other topic areas do you think should have been covered in this workshop?**

RESPONSES:

EXCELLENT
NONE- THIS WAS FINE
I THINK SHE COVERED THIS TOPIC IN A SENSITIVE YET BLUNT FASHION
WELL COVERED
CURRICULUM RESOURCES- WHAT'S OUT THERE?
POSSIBLY HAVE A WORKSHOP SOLELY FOR ELEMENTARY TEACHERS
MORE INFORMATION ON HOW TO DEAL WITH INDIVIDUALS WITH AIDS/HIV IN SCHOOL SETTING
NONE, THE WORKSHOP WAS EXCELLENT. THANK YOU FOR ALL THE LESSON PLANS. THEY WILL BE A BIG HELP. THE LESSON PLANS ARE FANTASTIC, I WISH MORE WORKSHOPS GAVE OUT THIS TYPE OF INFORMATION.
HAND OUT A PACKET OF ACTIVITIES THAT ARE GRADE SPECIFIC, READY TO USE IN SCHOOL. MORE ELEMENTARY TEACHING STRATEGIES
THERE WAS A GREAT DEAL OF INFORMATION
NONE THAT I CAN THINK OF AT THIS TIME
VERY GOOD WORKSHOP
MORE ON THE STRUCTURE AND BEHAVIORS OF VIRUSES- MORE SPECIFIC CLINICAL INFORMATION
NONE- IT WAS A GREAT WORKSHOP
VERY INFORMATIVE! I FELT VERY RELAXED IN THE ACTIVITIES. THE TRAINER HAD A GREAT SENSE OF HUMOR. I WAS IMPRESSED WITH THE KNOWLEDGE, PERSONALITY AND ORGANIZATION OF THE TRAINER. THANKS!
SUPER JOB! THE ACTIVITIES/IDEAS WERE WONDERFUL. I'D LIKE MORE! LONGER! ANOTHER DAY OF INFORMATION
LATEST/NEWEST DRUGS AND TREATMENT REGIMENS
GOOD JOB
ABSTINENCE. HOW TO DEAL WITH HIV STUDENT/STAFF
PUT HAND-OUTS TOGETHER IN A PACKET TO SAVE TIME



POSSIBLE HIGH SCHOOL PRESENTER ON THE PROBLEM
MEDICATIONS AND TREATMENTS
STATISTICS IMPORTANT TO IMPRESS STUDENTS/PARENTS WITH SITUATION IN MONTANA
LANGUAGE ERRORS REVIEWED- HIV, VIRUS, ETC.
STRESS OTHER STDs
IT WAS FINE



**Q-10 How would you rate this workshop?**

	Good 5	<----- 4	3	-----> 2	Poor 1
<b>Overall</b>	63.6%	20.0%	16.4%	0.0%	0.0%

	Good 5	<----- 4	3	-----> 2	Poor 1
<b>Information</b>	63.6%	21.8%	12.7%	1.8%	0.0%

	Good 5	<----- 4	3	-----> 2	Poor 1
<b>Materials</b>	63.6%	32.7%	3.6%	0.0%	0.0%

	Good 5	<----- 4	3	-----> 2	Poor 1
<b>Strategies</b>	67.3%	23.6%	9.1%	0.0%	0.0%

	Good 5	<----- 4	3	-----> 2	Poor 1
<b>Skills</b>	63.6%	21.8%	14.5%	0.0%	0.0%

## APPENDIX B

### FOLLOW-UP SURVEY FREQUENCY DISTRIBUTIONS



# **1997-1998** **FOLLOW-UP SURVEY FOR PARTICIPANTS**

The following survey was sent to all 159 trainees who participated in training sessions during the 1996-97 school year. One hundred eighteen participants responded to the survey.

**Q-1 Have you provided HIV instruction to students since you completed the staff development workshop?**

YES 67.9% (19 Respondents)  
 NO 32.1% (09 Respondents)

n = 28

**Q-2 About how many classroom periods (one hour) of HIV instruction have you provided since you completed the staff development workshop?**

AVERAGE OF THOSE RESPONDING YES IN Q-1: 6.13 Hours

INSTRUCTION HOURS RANGED FROM ONE HOUR TO 20 HOURS

**Q-3 How important were the following workshop topics in your efforts to provide quality HIV education to your students?**

	Very Important	Somewhat Important	Not at all Important
Knowledge about HIV and AIDS	94.7%	5.3%	0.0%
Ways to discuss sensitive topics	57.9%	42.1%	0.0%
Teaching strategies	68.4%	26.3%	5.3%
How to teach skills to help students refrain from engaging in sexual intercourse	42.1%	31.6%	26.3%
How to teach students to refrain from injecting drugs	47.4%	36.8%	15.8%
Human sexuality information	44.4%	38.9%	16.7%
Attitudes toward HIV-infected persons	94.7%	5.3%	0.0%
District policies related to HIV/AIDS	36.8%	52.6%	10.5%
Curriculum materials	63.2%	36.8%	0.0%
Safety (universal precautions)	89.5%	10.5%	0.0%

n = 19

**Q-4 What other comments do you have about changes needed in the staff development workshop?**

NONE- IT WAS EXCELLENT.
THE WORKSHOP WAS FANTASTIC.
NONE AT THIS TIME.
NEED NEW INFORMATION AND HUMAN SEXUALITY INFORMATION.
ALL TEACHERS SHOULD BE REQUIRED TO TEACH AND BE INSTRUCTED IN HIV. I NEED ADDITIONAL INFORMATION REGARDING A TEACHER'S ROLE IN DEALING WITH PARENTS OF THESE YOUNG CHILDREN.
BEING AT THE ELEMENTARY LEVEL, WE ARE PRETTY RESTRICTED AS TO WHAT WE CAN TEACH. I TAUGHT BASIC DISEASE INFORMATION WITH HIV/AIDS TO THE FOURTH GRADERS. THE SCHOOL NURSE WORKED WITH THE FIFTH AND SIXTH GRADERS.
THE GUEST SPEAKERS WERE AMAZING! IT WOULD BE HELPFUL TO HAVE A TEEN SPEAK- WHETHER INFECTED THEMSELVES OR ASSOCIATED WITH A FAMILY MEMBER THAT HAS HIV.
THE WORKSHOPS I'VE ATTENDED HAVE BEEN GREAT!
INCLUDE MORE OF THE BIOLOGY OF THE VIRUS! BE SPECIFIC!
I THOUGHT IT WAS A WONDERFUL WORKSHOP.
THE WORKSHOP I ATTENDED WAS FANTASTIC!
THE ONLY REASON I MARKED "SOMEWHAT IMPORTANT" WAS BECAUSE I HAVE A GREAT DEAL OF INFORMATION AND HAVE TAUGHT HIV AND AIDS FOR A NUMBER OF YEARS. I THOUGHT THE PEOPLE DIRECTLY AFFECTED WITH OR BY HIV WERE WONDERFUL! I ALSO GAINED SOME GREAT TEACHING STRATEGIES THAT I INCORPORATED RIGHT AWAY.

**APPENDIX C**  
**WORKSHOP EVALUATION INSTRUMENT**





**1997-98**  
**HIV/AIDS REGIONAL TRAINING EVALUATION**

Thanks for participating in today's workshop. You can help us improve future workshops by providing your candid assessment of your experience here today. Please take a few minutes to complete the following questions. There is no need to put your name on this form; your answers will be anonymous. Mark the appropriate item to indicate your response.

# **1997-98** **HIV/AIDS KNOWLEDGE INVENTORY**

**Q-1** Please circle the appropriate number to indicate your knowledge level in the listed areas **before** and **after** this workshop. (1 is a low knowledge level; 5 is a high knowledge level)

<i><u>Knowledge Component</u></i>	<i><u>Knowledge Before the Workshop</u></i>	<i><u>Knowledge After the Workshop</u></i>
A) HIV and AIDS terminology	1 2 3 4 5	1 2 3 4 5
B) HIV/AIDS disease information	1 2 3 4 5	1 2 3 4 5
C) STD information	1 2 3 4 5	1 2 3 4 5
D) Risk behaviors	1 2 3 4 5	1 2 3 4 5
E) Transmission methods	1 2 3 4 5	1 2 3 4 5
F) Transmission prevention	1 2 3 4 5	1 2 3 4 5
G) Dealing with HIV-infected students or staff persons	1 2 3 4 5	1 2 3 4 5
H) Safety (universal precautions)	1 2 3 4 5	1 2 3 4 5
I) Teaching how to refrain from engaging in sexual intercourse	1 2 3 4 5	1 2 3 4 5
J) Non-sexual ways of displaying affection	1 2 3 4 5	1 2 3 4 5
K) Human sexuality information	1 2 3 4 5	1 2 3 4 5
L) Skills development (decision-making skills, refusal skills, problem solving and critical thinking)	1 2 3 4 5	1 2 3 4 5
M) Curriculum materials and other resources	1 2 3 4 5	1 2 3 4 5
N) Policy issues:		
-education for all students	1 2 3 4 5	1 2 3 4 5
-human rights/discrimination	1 2 3 4 5	1 2 3 4 5
-safety (blood/body fluid cleanup, etc.)	1 2 3 4 5	1 2 3 4 5

**1997-98**  
**HIV PREVENTION EDUCATOR ABILITY INVENTORY**

**Q-2** Now that you have participated in a comprehensive staff development workshop for HIV educators, how confident are you that you can:

	<u>Completely Confident</u>	<u>Very Confident</u>	<u>Somewhat Confident</u>	<u>Not Very Confident</u>	<u>Not At All Confident</u>
A) Present accurate information to students	5	4	3	2	1
B) Answer parent's questions about HIV information	5	4	3	2	1
C) Help students to develop skills to refrain from sex	5	4	3	2	1
D) Explain to students at appropriate ages how a condom should be used	5	4	3	2	1
E) Increase students' tolerance toward people with HIV or AIDS	5	4	3	2	1
F) Help students reach a more accurate perception of their risk to infection with HIV	5	4	3	2	1

**1997-98**  
**HIV PREVENTION EDUCATION BARRIER INVENTORY**

**Q-3** Listed below are potential barriers to implementing effective HIV prevention education in schools. Please rate the extent to which each potential barrier affects HIV prevention education in your school.

	Major Barrier ←.....→ Not A Barrier				
A) Lack of curricular materials appropriate for use in our school.	5	4	3	2	1
B) Lack of staff expertise in teaching HIV prevention to our students.	5	4	3	2	1
C) Difficulty integrating AIDS materials into an already saturated curriculum.	5	4	3	2	1
D) Perceptions that youth in our community are not at risk of HIV infection.	5	4	3	2	1
E) Parental resistance to HIV education school settings.	5	4	3	2	1
F) Concern that sexually-explicit information will encourage promiscuous sexual behavior.	5	4	3	2	1
G) Inadequate support from the Office of Public Instruction.	5	4	3	2	1
H) Lack of district or school guidelines.	5	4	3	2	1
I) Lack of staff comfort in teaching HIV.	5	4	3	2	1

**1997-98**  
**HIV PREVENTION EDUCATION GENERAL QUESTIONS**

**Q-4** Have you attended any other OPI-sponsored HIV/STD prevention workshop in the past three years?

- A) Yes
- B) No

**Q-5** Are you taking this workshop for teacher certification renewal units?

- A) Yes
- B) No

**Q-6** Please rate your overall knowledge level of HIV/AIDS information (**Circle one choice**):

Good<----->Poor  
5    4    3    2    1

**Q-7** Please rate your overall confidence and comfort level for providing HIV/AIDS information (**Circle one choice**):

Good<----->Poor  
5    4    3    2    1

**Q-8** In what ways would you suggest the Office of Public Instruction assist you in removing barriers to presenting effective HIV prevention education?

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**Q-9** What improvements or other topic areas do you think should have been covered in this workshop?

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**1997-98  
HIV PREVENTION EDUCATION SUMMARY EVALUATION**

**Q-10** How would you rate this workshop?

	Superior ←.....→ Poor				
Overall	5	4	3	2	1
Information	5	4	3	2	1
Materials	5	4	3	2	1
Teaching Strategies	5	4	3	2	1
Skills Practice	5	4	3	2	1

**PLEASE LEAVE THIS EVALUATION FORM WITH THE WORKSHOP PRESENTER**

**THANK YOU VERY MUCH FOR PARTICIPATING IN THIS EVALUATION**



**APPENDIX D**  
**FOLLOW-UP SURVEY INSTRUMENT**



**1997-1998**  
**FOLLOW-UP SURVEY FOR PARTICIPANTS**

Some months ago, you attended a staff development workshop on HIV/AIDS. The purpose of this survey is to determine how helpful that workshop was, now that you have had an opportunity to use what you learned. The information you provide will be used to improve future staff development programs.

Please **DO NOT** put your name on this form. Your answers will be anonymous. When you have completed this survey, **please return it in the enclosed stamped, self-addressed envelope.**

1. Have you provided HIV instruction to students since you completed the staff development workshop?

☐

YES

☐

NO

(If no, stop here and return the survey in the enclosed envelope)

2. About how many classroom periods (one hour) of HIV instruction have you provided since you completed the staff development workshop? \_\_\_\_\_

3. How important were the following workshop topics in your efforts to provide quality HIV education to your students?

	Very Important	Somewhat Important	Not at All Important
a. Knowledge about HIV and AIDS	( )	( )	( )
b. Ways to discuss sensitive topics	( )	( )	( )
c. Teaching strategies	( )	( )	( )
d. How to teach skills to help students refrain from engaging in sexual intercourse	( )	( )	( )
e. How to teach students to refrain from injecting drugs	( )	( )	( )
f. Human sexuality information	( )	( )	( )
g. Attitudes toward HIV-infected persons	( )	( )	( )
h. District policies related to HIV/AIDS	( )	( )	( )
i. Curriculum materials	( )	( )	( )
j. Safety (universal precautions)	( )	( )	( )

4. What other comments do you have about changes needed in the staff development workshop?

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**Thank you for completing this survey.**





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